

COPIES 2

FILED	NUMBER
20	2

DATE	FILED

DATE	FILED

DATE	FILED

DATE	FILED

DATE	FILED

TOTAL
ADDIT. FEE

TOTAL
ADDIT. FEE

(Column 2) (Column 3)

NAME REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	11113	=
Ind. Spand. Unit	11113	=

RATE	ADDI TIONAL FEE	RATE	ADDI TIONAL FEE
X\$9=		OR	X\$14=
X40=		OR	X80=
+135=		OR	X270=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.